

Returned with Honor

Returned Missionary Dating Application

Due to the overwhelming demand for returned missionaries, this form has been established in an effort to qualify the prospective candidates. This form must be filled out by all desiring dating privileges to returned missionaries. Complete cooperation is requested in filling out this form. Use only correct and pertinent information. If any additional help is required due to underqualification, comestibles and photos are accepted as bribes. Please remember 2 Nephi 9:34 while filling out this form.

Information of Returned Missionary

This section is to be filled out by returned missionary

Returned missionary's name (First, MI, Last)	Place of Origin or Mission Served	Years Served	Time since return	Favorite Color
		to	mo. yrs.	

Identification

Type or print all requested information using black or blue ink

Name (first, middle, last)	Date of Birth (month, day, year)	Are you:	Gender
		<input type="checkbox"/> Over 21 <input type="checkbox"/> Under 21 <input type="checkbox"/> Under 18 <input type="checkbox"/> Under 16 <input type="checkbox"/> Still in primary	<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> ?
Home Street Address	Email address	Home Phone	Work Phone
		() ()	
City	ST	Zip/Postal code	Were you:
			<input type="checkbox"/> Born <input type="checkbox"/> Adopted <input type="checkbox"/> Hatched <input type="checkbox"/> Kidnapped <input type="checkbox"/> Found on front porch <input type="checkbox"/> Government reject <input type="checkbox"/> Fell from sky <input type="checkbox"/> Other
Height	Weight (please be honest, this is confidential)	Color of hair	Natural color of hair
		Eye color	Ring size (VERY important)
		Marital Status	
		<input type="checkbox"/> Single <input type="checkbox"/> Engaged <input type="checkbox"/> Other (if other, tear up form)	

Family Background

Do you live with your parents?	If yes, is there enough room for you to continue living there after marriage?	If you do not live with parents, where do you live?	Is your refrigerator always stocked?	If no, why
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have smaller brothers or sisters?	Can they be bribed?	If yes: With what	How much	For how long
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is there a history of mental illness in your family?	Do you have any royal blood?	How about horse thieves?	WWF Wrestlers?	Crazed 6-foot Albanian Dwarfs?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your Father friendly?	Does he own a gun?	If yes, what caliber?	Has he ever used it?	Is he a:
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Good Shot <input type="checkbox"/> Fair Shot <input type="checkbox"/> Poor Shot <input type="checkbox"/> Expert Shot <input type="checkbox"/> Deadly Shot <input type="checkbox"/> Big Shot <input type="checkbox"/> Cheap Shot <input type="checkbox"/> Rabies Shot <input type="checkbox"/> 3-point Shot
Does your dad give temple recommend interviews to your dates?	Do your parents approve of returned missionaries?	If no, why?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If parents are sealed, in which temple were they sealed?	Do you want to be sealed there as well?	Any weird additional information about your family:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you have a dog?	How big?	What kind?	Does he bite?	Does he have his shots?
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			Can he be out-run?	Ever tried feeding peanut butter or bubble gum to a dog?
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Personal Information

Have you ever seen the C.E.S. video "Godly Sorrow" about the girl who can't go to the temple?	Is your testimony:	How often do you bear your testimony?	On a separate page, please write your testimony (not thank-a-mony or travel-log)	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Weak <input type="checkbox"/> Strong <input type="checkbox"/> Changeable <input type="checkbox"/> None			
Do you go to church:	*Would you like to know more about the LDS church, eternal families and other fun stuff?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Every week <input type="checkbox"/> Every other week <input type="checkbox"/> Three times a month <input type="checkbox"/> Once a month <input type="checkbox"/> Twice a year <input type="checkbox"/> Wouldn't be caught dead there <input type="checkbox"/> Never heard of it*				
Are you a seminary graduate?	Did you receive your Young Woman's or Eagle scout (as applicable) award?	What callings have you had?		
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Did you graduate from:	School name for highest education achieved, major, and year of graduation		G.P.A.	If illiterate, please provide name of the person filling this out.
<input type="checkbox"/> Grade School <input type="checkbox"/> Jr. High <input type="checkbox"/> High School <input type="checkbox"/> Trade School <input type="checkbox"/> College <input type="checkbox"/> Charm school				
Do you:	Any other shortcoming?	Are YOU also a returned missionary?	Sense of humor:	
<input type="checkbox"/> Please easily <input type="checkbox"/> Gossip <input type="checkbox"/> Anger easily <input type="checkbox"/> Stay Mad <input type="checkbox"/> Snore <input type="checkbox"/> Covet easily		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Fair <input type="checkbox"/> Hilarious <input type="checkbox"/> Giggly <input type="checkbox"/> Grin <input type="checkbox"/> Chuckle <input type="checkbox"/> Dead	
Are you presently employed?	Where?	For how long?	Monthly income	Would this meager income support me in the manner to which I have become accustomed to?
<input type="checkbox"/> Yes <input type="checkbox"/> No				<input type="checkbox"/> Yes <input type="checkbox"/> No
Number, in order your first 8 favorite dishes:				
Big Mac <input type="checkbox"/> Steak and Lobster <input type="checkbox"/> Hot Dogs <input type="checkbox"/> Seafood <input type="checkbox"/> Pizza <input type="checkbox"/> Peanutbutter Sandwiches <input type="checkbox"/> Top Ramen <input type="checkbox"/> Macaroni and Cheese <input type="checkbox"/> Corn Mexican food <input type="checkbox"/> Low/Non fat stuff <input type="checkbox"/> Cultural dishes from the mission field <input type="checkbox"/> Tuna fish <input type="checkbox"/> Chocolate Cake <input type="checkbox"/> Spam <input type="checkbox"/> Other:				
Can you cook?	How Well? (1-10)	What do you like to cook?	Would you consider submitting a sample?	
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Can you Sew?	How Well? (1-10)	Do you make your own clothes?	Do you wear your own clothes?	Can you cut hair?
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you dress mostly in:	Do you dress modestly?		If no, Why?	
<input type="checkbox"/> Dresses <input type="checkbox"/> Skirts <input type="checkbox"/> Blouses <input type="checkbox"/> Sweaters <input type="checkbox"/> Polo shirts <input type="checkbox"/> Shorts <input type="checkbox"/> Sleeveless <input type="checkbox"/> Pants <input type="checkbox"/> Turtle neck <input type="checkbox"/> T-shirts <input type="checkbox"/> Suit & Tie <input type="checkbox"/> Whatever's Clean!	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If you had a choice between elegant and casual clothing, which would you prefer?	What color of lipstick do you prefer?	Do you use makeup?	If so, how much?	Is it very necessary?
<input type="checkbox"/> Elegant <input type="checkbox"/> Casual		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Heavy <input type="checkbox"/> Caked on	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, why?	Languages in addition to english that you speak:		Ever heard of the commitment pattern?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
What is your favorite reading material?	Which form of literature do you read?			
	<input type="checkbox"/> Scriptures <input type="checkbox"/> Novels <input type="checkbox"/> Classics <input type="checkbox"/> Comic Books <input type="checkbox"/> Cosmo type mags <input type="checkbox"/> New Era <input type="checkbox"/> Friend <input type="checkbox"/> S.I. or G.Q. <input type="checkbox"/> Mad Mag. <input type="checkbox"/> Tracting pamphlets <input type="checkbox"/> Tabloids <input type="checkbox"/> Computer stuff			
Favorite Color	Favorite TV Show	Favorite Sport	Favorite form of recreation	
Do you drink?	If yes, which?	Are you:		
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Hot Chocolate <input type="checkbox"/> Coke <input type="checkbox"/> Root Beer <input type="checkbox"/> Water <input type="checkbox"/> Milk <input type="checkbox"/> Diet Coke <input type="checkbox"/> Sprite <input type="checkbox"/> Other (please specify)	<input type="checkbox"/> Soft spoken <input type="checkbox"/> Loud spoken <input type="checkbox"/> Spoken for <input type="checkbox"/> Other		
Have you ever been arrested?	If so, what for?	Music Preference:	Would you be willing to sacrifice your music for the Music starved RM?	
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No	
How many children do you want and expect to have?	If over 12, why?	If under 4, why?		
In light of our priesthood leader's council for longer courtships and shorter engagements, length of engagement preferred:	Is an expensive engagement ring/wedding/wedding dress more important to you than financial stability for the first few years of marriage when so many relationships end due to monetary problems?			
(If over 6 months, tear up form)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
What size of diamond do you require or desire?	Enter the amount you THINK this will cost:		What is your idea of a perfect honeymoon?	
DO YOU KNOW HOW MUCH THAT WILL COST?				
In what occupation would you prefer your Spouse?	Are you willing to put your Spouse through school?	How do you feel about Pres. Benson's exhortation that women stay at home, raise kids and not work?	Will you support your spouse in his/her callings?	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Like it <input type="checkbox"/> Don't like it	<input type="checkbox"/> Yes <input type="checkbox"/> No	

